

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		4/2
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S-H	1085	5/7/01
RESPONSE FORMALITY REVIEW	MD	JEAN	08/01/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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10-1-01
8-2-01

10-1-01
8-2-01